





Issue Classification 	Application No.		Applicant(s)	
	10/647,666		MEIER ET AL.	
	Examiner		Art Unit	
Eugene H Eickholt		2854		

ISSUE CLASSIFICATION									
ORIGINAL		CLASS	CROSS REFERENCE(S)						
CLASS	SUBCLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)						
400	208	400	120	240	521				
INTERNATIONAL CLASSIFICATION		347	218	220					
B41J	35728								
	/								
	/								
	/								
	/								
(Assistant Examiner) (Date)		 EUGENE H. EICKHOLT PRIMARY EXAMINER			Total Claims Allowed: 236				
 (Legal Instruments Examiner) (Date)		(Primary Examiner) (Date)			O.G. Print Claim(s)		O.G. Print Fig		
1-10-05		1-10-05			1		2		

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
1	1	26	31	55	61	87	91		121	116	151	146	181		
	2	27	32	56	62		92		122	117	152	147	182		
2	3	28	33	57	63	88	93		123	118	153	148	183		
3	4	29	34	58	64	89	94		124	119	154	149	184		
4	5	30	35	59	65	90	95		125	120	155	150	185		
	6	31	36	60	66	91	96		126	121	156	151	186		
	7	32	37	61	67	92	97		127	122	157	152	187		
5	8	33	38	62	68	93	98		128	123	158	153	188		
	9	34	39	63	69	94	99		129	124	159	154	189		
6	10	35	40	64	70	95	100		130	125	160	155	190		
7	11	36	41	65	71	96	101		131	126	161	156	191		
8	12	37	42	66	72	97	102		132	127	162	157	192		
	13	38	43	67	73	98	103		133	128	163	158	193		
9	14	39	44	68	74	99	104		134	129	164	159	194		
10	15	40	45	69	75	100	105		135	130	165	160	195		
11	16	41	46	70	76	101	106		136	131	166	161	196		
12	17	42	47	71	77	102	107		137	132	167	162	197		
13	18	43	48	72	78	103	108		138	133	168	163	198		
14	19	44	49	73	79	104	109		139	134	169	164	199		
15	20	45	50	74	80	105	110		140	135	170	165	200		
16	21	46	51	75	81	106	111		141	136	171	166	201		
17	22	47	52	76	82	107	112	109	142	137	172	167	202		
18	23	48	53	77	83	108	113	110	143	138	173	168	203		
19	24	49	54	78	84		114	111	144	139	174	169	204		
20	25	50	55	79	85		115	112	145	140	175	170	205		
21	26	51	56	80	86		116	113	146	141	176	171	206		
22	27	52	57	81	87		117	114	147	142	177	172	207		
23	28	53	58	82	88		118	115	148	143	178	173	208		
24	29	54	59	83	89		119	116	149	144	179	174	209		
25	30	55	60	84	90		120	117	150	145	180	175	210		

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(Assistant Examiner) (Date)									Total Claims Allowed:
(Legal Instruments Examiner) (Date)									(Primary Examiner) (Date)

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
176	211	206	241	236	271		301		391
177	212	207	242		272		302		392
178	213	208	243		273		303		393
179	214	209	244		274		304		394
180	215	210	245		275		305		395
181	216	211	246		276		306		396
182	217	212	247		277		307		397
183	218	213	248		278		308		398
184	219	214	249		279		309		399
185	220	215	250		280		310		400
186	221	216	251		281		311		401
187	222	217	252		282		312		402
188	223	218	253		283		313		403
189	224	219	254		284		314		404
190	225	220	255		285		315		405
191	226	221	256		286		316		406
192	227	222	257		287		317		407
193	228	223	258		288		318		408
194	229	224	259		289		319		409
195	230	225	260		290		320		410
196	231	226	261		291		321		411
197	232	227	262		292		322		412
198	233	228	263		293		323		413
199	234	229	264		294		324		414
200	235	230	265		295		325		415
201	236	231	266		296		326		416
202	237	232	267		297		327		417
203	238	233	268		298		328		418
204	239	234	269		299		329		419
205	240	235	270		300		330		420